

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF EDWARD KOMITO	COURT CASE NUMBER 18-2824
DEFENDANT LEXISNEXIS RISK SOLUTIONS, INC., REED ELSEVIER, INC. AND RELX GROUP	TYPE OF PROCESS SUMMONS & COMPLAINT

**SERVE AT** { NAME OF INDIVIDUAL, COMPANY, CORPORATION ETC TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
REED ELSEVIER, INC. AND RELX GROUP  
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  
230 PARK AVE., NEW YORK, NY 10169

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

EDWARD KOMITO  
1326 DOE TRAIL ROAD  
ALLENTOWN, PA 18104

**FILED**  
**AUG 23 2018**  
KATE BARKMAN, Clerk  
By \_\_\_\_\_ Dep. Clerk

Number of process to be served with this Form 285	1
Number of parties to be served in this case	3
Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

LEXISNEXIS SOLUTIONS, INC., 1000 ALDERMAN DRIVE, SUITE 21 N57, ALPHARETTA, GEORGIA 30005

Signature of Attorney other Originator requesting service on behalf of

*Edward Komito*

☒ PLAINTIFF  
☐ DEFENDANT

TELEPHONE NUMBER

610-395-7898

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin 66	District to Serve 054	Signature of Authorized USMS Deputy or Clerk <i>M. J. J. J.</i>	Date 8/18/18
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc shown at the address inserted below

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc named above (See remarks below)

Name and title of individual served (if not shown above)

*Jim Wong - Admin*

Address (complete only different than shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Date  
8/17/18  
Time  
1:52  
☐ am  
☒ pm

Signature of U.S. Marshal or Deputy  
*[Signature]*

Service Fee \$65.00	Total Mileage Charges including endeavors \$5.78	Forwarding Fee 8.00	Total Charges \$78.78	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS

DISTRIBUTION

- 1 CLERK OF THE COURT
- 2 USMS RECORD
- 3 NOTICE OF SERVICE
- 4 BILLING STATEMENT\* To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal
- 5 ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

18-2824-3 ✓

U.S. Department of Justice  
United States Marshals Service

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8/1/18

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*Jim Wong Admin*

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18-2824-2 ✓

Form USM-285  
Rev 11/13